Director of Public Health report 2024

Women's Health

Introduction from Dr Lincoln Sargeant: Public Health Annual Report 23/24 (youtube.com)



My annual report this year focuses on women's health. The starting point for public health is the population and the decision to highlight a particular group in the population raises questions as to why this group and not another. This is especially the case when the overall measures of population health (life expectancy and healthy life expectancy) suggest that women live longer and healthier lives on average compared to men.

There are at least three reasons why a focus on women's health is justified in Torbay. The first is that despite the progress made in the legal protections of women from discrimination and the improvement in societal attitudes that have enabled their empowerment, there remain barriers to access for services and opportunities that promote the health and wellbeing of women. Debates about the status of transgender people indicate that there are still sectors of society that have not accepted gender equality and find movement from one gender to another transgressive. Bias and prejudice, whether conscious or unconscious, persist and continue to impact negatively on the physical, mental, social, and economic wellbeing of women. Even where genuine progress is evident it takes times for the negative effects of gender discrimination to be fully overcome.

The second reason for the focus on the health of women follows from the first. The stereotype of the woman's role being in the home meant that many of the tasks related to the care, nurture and education of children fell to women. While there is general acceptance that both men and women have an equal and shared role for bringing up their children these duties fall disproportionately to women in the home. Professions such as nursing, childcare and primary school education are

predominantly female. The influence of women on the health of children in their early years is therefore substantial. The health of women is therefore important for the health of our children and especially for those children with special needs and disabilities.

The third reason is that women often also take on responsibility for the health of others, including men in their lives. Women aged 16 to 60 years are more likely to seek medical attention than similarly aged men (Wang Y, Hunt K Nazareth I, et al. BMJ Open 2013¹) and have a positive influence on the health seeking behaviours of their male partners. While these relationships are complex, a focus on the health of women is likely to have positive impacts not only on the health and development of children but also on men and others who women may have a caring role with.

While Torbay and the UK are further on the path to gender equality and the empowerment of women and girls, this United Nations Sustainable Development Goal is still relevant here and justifies the focus of the annual report on this half of our population.

Women's Health in Torbay: Public Health Annual Report 23/24 (youtube.com)



1. Women, employment, and household labour

The division of labour in the workplace and home continues to disadvantage women in Torbay with women often engaged in lower-paid or part-time work, alongside unpaid caring duties.

Despite much progress, the division of household labour continues to reflect historic gender roles. In most wealthy countries, even when women engage in paid employment, they often still perform much of the household labour ¹.

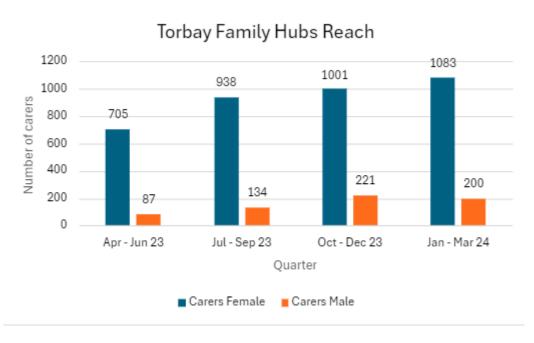


Figure 1: Torbay Family Hubs Reach over the fiscal year 2023/2024. Reach reports count an individual member once, no matter how many times they are recorded. Data source: Torbay Family Hubs.

The impact of an ageing society means that in addition to bringing up their own family, many women will also care for older relatives, often after their children have become independent adults. In 2019, there were 1.25 million 'sandwich carers' in the UK, of whom, 68% were women². Carers UK use census data from 2021³ asserts that 59% of unpaid carers are women, and that women are more likely to become carers and to provide more hours of unpaid care than men. In addition, more women than men provide high intensity care at ages when they would expect to be in paid work⁴. These carer responsibilities impact upon the employment opportunities and options for many women.

In Torbay, women are more likely than men to provide unpaid care to others in relation to long-term physical or mental health conditions or aging. 13% of females (aged over 5) compared to 9.5% of males provide unpaid care to other Torbay residents. This is across all age ranges and the proportion of women in Torbay providing unpaid care is significantly higher than England at 10.3%. This is highlighted in the latest local Joint Strategic Health Assessment (JSNA)⁵.

Torbay has consistently lower average salaries than the national and regional average with women often doing lower paid or part-time work, alongside unpaid caring duties.

Organisational policies and culture often play their part in decisions within the home about

¹ The extreme gendering of COVID-19: Household tasks and division of labour satisfaction during the pandemic - Haney - 2022 - Wiley Online Library

² Carers at breaking point: The social care burden on women | Age UK

³ Key facts and figures | Carers UK

⁴ Petrillo_Bennett_Pryce_2023.pdf (bham.ac.uk)

⁵ Provisional TORBAY JOINT STRATEGIC NEEDS ASSESSMENT 2024/25 (southdevonandtorbay.info)

who should work and who should stay at work which can be the difference between continuing traditional gender roles or a more equal household. The impact of caring responsibilities as is not only in felt workplaces and education settings, but also across can create expectations and norms about the role of women in families, communities, and all of Torbay. The impact being felt beyond the workplace, shaping societal norms and individual perceptions of gender roles within the context of family life.

Torbay has an ambitious <u>economic growth strategy</u> which calls for investment in our tech sector, our visitor economy as well as the strong potential for smaller tech companies and creative digital. By supporting women to develop skills, knowledge, qualifications, and confidence to establish, develop and grow employment opportunities, Torbay has the potential to unlock its entire workforce and support women and families to thrive.

Recommendation:

Develop flexible and inclusive employment practices to reflect and encourage women into education and employment

2. Working with vulnerable women

Women more commonly experience domestic abuse and sexual violence in their lives than men. Limited housing options makes it more difficult to escape abuse. It is important to consider the intersectional experiences of women, including sex, gender, disability, ethnicity, sexuality, and experiences of violence.



Finding yourself in a vulnerable position can happen to anyone at any time, whether through loss of financial security, employment, relationship status, bereavement, health and wellbeing or other circumstance. Vulnerability for women can present differently than for men.

Violence against women and girls can take place within the home and within the community. Violent acts themselves can incur short-and-long-term impacts on women's physical health with all forms of abuse and harassment impacting women's emotional health. Women disproportionately bear the burden of sexual violence and domestic abuse nationally, and in Torbay.

Extrapolating from national data, we estimate that around 552 women aged 16 – 59 years in Torbay were victim of rape or assault by penetration (including attempts) between March 2017 and March 2020 ^{6 7}. Of these, around 348 (63%) of these women are likely to have experienced mental or emotional problems as a result ⁸. Women have also reported having to take time off work, losing their job, or being forced to give up work, and trying to kill themselves because of being a victim of rape or assault.

Difficult relationships, especially those involving coercive behaviour, and dealing with home and family pressures contribute to poor mental health in women. 59% of respondents identified violence and abuse as a top issue, surpassing money worries, loneliness, hormonal health, and work or exam pressures ⁹.

Torbay suicide coroner audit findings: 42% of women who died by suicide in Torbay (2018-2022) were noted to have experienced domestic abuse, sexual violence, or childhood abuse in their lifetime.

Torbay's commitment to protecting women and girls in our community is seen in two multi-agency strategies: the <u>Serious Violence Strategy</u> and <u>Domestic Abuse and Sexual Violence Strategy</u>. These pick up the dangers for women and girls within their homes and within their communities, often at the hand of male members of these homes and communities. The <u>Torbay Safeguarding Children Partnership</u> reinforces these efforts by overseeing key processes including the prevention of exploitation of children and young people.

Safer Torbay Serious Violence ¹⁰ Strategy has noted for the Torbay community:

- Stalking & Harassment incidents increased by 12% within 2021/22 compared to the previous two years. Trend indicates incidents within 2022/23 will increase by approximately 8%.
- Devon and Cornwall Police were involved in 2,148 separate serious violence incidents occurred across Torbay (April 2019 to October 2022)
 - o 1,841 of these incidents identified an offender/suspect responsible for the incident.
 - o 70% of offenders were male.
- Following analysis of data in respect of youth violence in Torbay key points have been determined.
 - Higher rate of violent offences per 1000 population in Torbay than the national average and
 - o higher rate of hospital admissions due to violence, including sexual violence.

⁶ population torbay 2018.pdf (southdevonandtorbay.info)

⁷ Sexual offences prevalence and victim characteristics, England and Wales - Office for National Statistics (ons.gov.uk)

⁸ Nature of sexual assault by rape or penetration, England and Wales - Office for National Statistics (ons.gov.uk)

⁹ https://www.rcpsych.ac.uk/news-and-features/latest-news/detail/2024/03/08/violence-and-abuse-are-driving-mentalillness-in-women-and-girls--psychiatrists-warn

¹⁰ Safer Torbay Serious Violence Strategy 2024/29 - Torbay Council

Torbay Domestic Abuse Headlines 11:

- 2,005 police incidents of domestic abuse in Torbay (2020/21).
- Domestic abuse accounts for 22% of all crimes in Torbay.
- 24% of domestic violence and abuse (DVA) related crimes are for stalking and harassment.
- 72% of victims reporting to the police over the past 3 years have been female (2018-21)
- 84% of domestic abuse offenders were male (2020/21)
- 63 Victims of domestic abuse were placed in homelessness temporary accommodation (2023/24)
- Estimated only 33% of people experiencing DVA in Torbay are known to services.

Sexual harassment and online sexual abuse:

- Includes being sent unsolicited explicit sexual material and being pressured to send nude pictures ('nudes')
- 90% of girls said being sent explicit pictures or videos of things they did not want to see happens a lot or sometimes to them or their peers ¹².

"Girls told us that sexual harassment and online sexual abuse, such as being sent unsolicited explicit sexual material and being pressured to send nude pictures ('nudes'), are much more prevalent than adults realise. For example, 90% **of girls** ... said being sent explicit pictures or videos of things they did not want to see happens a lot or sometimes to them or their peers. Children and young people told us that sexual harassment occurs so frequently that it has become 'commonplace.'¹⁶

In recognition of sexual violence such as this is not being confined to women in any specific age groups, in 2020, a website called <u>Everyone's Invited</u>, was launched. This allows people to anonymously log their experiences of sexual harassment and assault within education settings. This site includes logs for Torbay primary and secondary schools for alleged incidents.

Of 200 already homeless households in Torbay, between January and March 2022, 20% of these households lost their last settled home due to domestic abuse¹³.

Many women have told us that because of domestic abuse they have had to choose between living in poor accommodation or returning to their perpetrator. The difficulties are exacerbated by having to navigate a complex local housing situation, which is also in crisis. While housing is an issue across the UK, Torbay is facing a particularly severe shortage. Torbay Council declared a housing crisis in 2021¹⁴. The rate of homelessness in Torbay is over twice the national average¹⁵

16. Given the increased likelihood of women also removing children from violent domestic situations, this housing crisis is particularly felt by women and children, exacerbating vulnerability.

Support systems for women are crucial, providing much needed assistance and advocacy. Often the support being sought is within a single-sex safe community. Examples of available support are the housing and cost of living surgeries have been set up within Family Hubs to improve access to housing support and early help for families. Also, to help women eat healthily Ladies Lounge have

¹⁵ Housing in Torbay (southdevonandtorbay.info)

¹¹ Breaking the Chain Domestic Abuse and Sexual Violence Strategy

¹² OFSTED, Review of sexual abuse in schools and colleges June 2021

¹³ Housing in Torbay (southdevonandtorbay.info)

¹⁴ Empty Homes - Torbay Council

¹⁶ Housing Strategy 2023 to 2030 - Torbay Council

investigated support for women on how to make meals more nutritious when you only have a kettle.

Leonard Stocks Centre: Public Health Annual Report 23/24 (youtube.com)

Recommendation: Commit to actions which raise awareness of Domestic and Sexual Violence and directly address of the impact of domestic abuse on women who experience it.

3. Discrimination, inclusion, and exclusion

Women and those with physically female sex reproductive characteristics are disadvantage by a medical bias towards male physiology as well as the disparity of experience amongst diverse groups of women.

Women and those with physically female sex reproductive characteristics experience different challenges to biological males. Managing menstrual cycles, contraception, maternity and menopause are unique and require women to navigate healthcare systems, media and advertising influences, community, and cultural norms. However, women face frequent discrimination in healthcare, due to their sex, sexual orientation and / or gender identity.

Firstly, there is a bias towards male physiology built into medicine. The vast majority of medical (and other) trials are conducted solely on biological men, as women's hormones, menstrual cycles and reproductive changes across the life course are seen as 'too complicated' to study¹⁷. Results

¹⁷ A framework to analyse gender bias in epidemiological research | Journal of Epidemiology & Community Health (bmj.com)

of clinical trials on men are extrapolated to women and treatments are assumed to have the same effect on women as men¹⁸. Medical investigations and therapies are designed and administrated based on how diseases manifest in men and may therefore be ineffective in women.

Furthermore, when we investigate health outcomes and experiences of Black, Asian and Minority Ethnic Women we see more inequalities, such as an increased risk of maternal death (almost four times higher for Black women and twice as high for Asian women as their white counterparts¹⁹). Disparities also exist across sexual orientation, disability, and other protected characteristics. Examples include, Lesbian and Bisexual women have a higher proportion of current smokers (at 31%, compared to heterosexual women who are current smokers is 16%) . Trans and non-binary people experience worse mental health outcomes compared to their lesbian and gay counterparts and more frequently report negative interactions with healthcare professionals²⁰. Rates of obesity are higher among disabled adults compared to those not reporting a disability. Additionally, rates of obesity are higher amongst women with a learning disability compared to men with a learning disability, (45% compared to 31% respectively) ²¹. Where there is no evidence of an improvement or decline in outcomes, this is because sex-disaggregated data is unavailable.

Women's healthcare needs change over time, and at all stages, there are opportunities to promote good health, prevent negative outcomes and restore health and wellbeing. Doing this well for women in Torbay means improving all our systems to account for sex, sexuality, gender identity and other protected characteristics in a way that informs and drives addressing health inequalities. By taking this crucial step, we will start to understand the needs of our populations and how we can make a difference across not only healthcare, but also in social care, housing, economic development, and industry.

Recommendation:

Improved access, experience, and outcomes for women's healthcare through Torbay's women's health hub.

4. Connecting with communities

Mental health and wellbeing are an issue across the life course for women and girls in Torbay. Connecting with groups and activities in the communities to improve people's mental health is as important to them as accessing services.

Girls Against Anxiety: Public Health Annual Report 23/24 (youtube.com)

¹⁸ Full article: bias Gender in clinical research, pharmaceutical marketing, and the prescription of drugs (tandfonline.com)

¹⁹ Black maternal health - Women and Equalities Committee (parliament.uk)

²⁰ review of lesbian, gay, bisexual, trans and intersex (LGBTI) health and healthcare inequalities | European Journal of Public Health | Oxford Academic (oup.com)

²¹ health-inequalities-briefing-2 (nice.org.uk)



Women and girls are three times more likely to experience **common mental health conditions** such as depression and anxiety and traumatic stress related disorders than men and boys. Several risk factors explored throughout this report are known contribute to this higher prevalence: caring responsibilities, poverty, unemployment and debt, isolation, and domestic and sexual violence²².

We also know young women who have a probable mental health condition in Torbay far outweigh the numbers of young men, see figure below. (Figure 2)

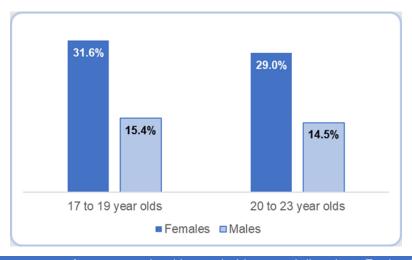


Fig 2: Percentage of young people with a probable mental disorder – England (2023)

Source: NHS England – Mental Health of Children and Young People in England, 2023, using the Strengths and Difficulties Questionnaire

²² https://www.mentalhealth.org.uk/explore-mental-health/a-z-topics/women-and-mental-health

Self-harm is a significant public health issue in Torbay and nationally. Data suggests that self-harm prevalence amongst young people has increased significantly in England over the past 20 years ²³ ²⁴. However, the exact numbers of people affected by self-harm can be difficult to quantify as available data is taken from those who seek medical assistance and not those who do not.

Hospital admission rates show a concerning trend in Torbay, where hospital admission rates for self-harm and eating disorders among females exceed the national average for England ²⁵. While the number of hospital admissions with a primary diagnosis of anorexia, bulimia, or other eating disorders amongst under 18s is small, only the most severe cases receive hospital interventions. Torbay has had a consistently significantly higher rate of admissions of under 18s (all persons- male and female combined) with a primary diagnosis of an eating disorder than England from 2017/18 onwards. In 2021/22 the Torbay rate was 90.3 per 100,000 (England- 32.8). Most hospital admissions for an eating disorder were young women. Local estimates for self-harm suggest that hospital admissions only represent around 5% of the children and young people who are self-harming in Torbay ²⁶.

The challenge of loneliness is keenly felt by women, who are 1.2 times more likely than men to be chronically lonely ²⁷ and is not exclusive to older women. Underlying reasons connecting to other disparities highlighted in this report such as caring responsibilities or economic exclusion and poverty. Another factor that comes into play in Torbay are those who move into the area, often following retirement who have few, if any social and community links.

Women's Institute: Public Health Annual Report 23/24 - YouTube

²³ Responding to the rising prevalence of self-harm - The Lancet Psychiatry

Intentional self-harm in adolescence: An analysis of data from the Health Behaviour in School-aged Children (HBSC) survey for England, 2014

²⁵ Provisional TORBAY JOINT STRATEGIC NEEDS ASSESSMENT 2024/25 (southdevonandtorbay.info)

²⁶ 2024 Torbay Health Needs Assessment for Children and Young People, Part One- A Quantitative Analysis (southdevonandtorbay.info)

²⁷ Investigating factors associated with loneliness in adults in England - GOV.UK (www.gov.uk)



In <u>Torbay</u> there are 311 registered charities ²⁸ and an unknown number of community interest companies. For those focused purely on women and girls, they can focus on activities or are support based groups, all support women's health, and wellbeing. In addition to these, further services will be offered specifically to women through commissioned services or directly provided by our partners. Each is unique in their offer.

There remains unmet need however, and public services and the voluntary sector are challenged to meet the full range of needs for our populations. We have heard often that there are gaps in mental health support, with much focus on high end support, which means that women often must either access private support or go without. The stories from women we have spoken to highlight the importance of community-led peer support.

Recommendation:

Recognising and supporting grass roots women's groups and activities as integral components of mental health and wellbeing provision.

5. Reproductive health

The opportunities to maintain good reproductive took a hit during the Covid-10 pandemic. Partnership work is happening to re-establish and go further in creating joined up systems and experiences.

²⁸ Search the register of charities (charitycommission.gov.uk)

Maintaining good reproductive health outcomes throughout the life course has profound long-term effects on individuals and communities. We know that women and girls experience poor reproductive health outcomes, with almost half of all pregnancies being ambivalent or unplanned across the UK. In Torbay, this is also true and local data indicates that while rates have significantly fallen, Torbay remains an outlier for teenage conceptions, abortions amongst all ages and repeat abortions. This suggests that awareness and uptake of contraception may be an issue for some women locally.

For some years, and particularly since the Covid-19 pandemic, some services did not bounce back as we had hoped in general practice. LARC (Long-Acting Reversible Contraception) is one of them, and access to LARC in general practice across the Bay is mixed. In terms of access to contraception, there is an offer for Long-Acting Reversible Contraception in each Primary Care Network, but this could be improved. The specialist contraception services at Castle Circus in Torquay are supporting more women than ever in Torbay and provide a high-quality service to all our local community. We know that to improve outcomes, women need a choice of where to get contraceptive care, and value having a range of choices in their local surgery.

Access for women to get Intra-Uterine Devices (IUDs) to support heavy menstrual bleeding and other reproductive health conditions is supported by joint working with Primary Care, NHS Devon ICB (Integrated Care Board) and Torbay Council's Public Health Team. As part of this national Women's Health strategy, NHS Devon ICB has been provided with non-recurrent funding to establish a Women's Health Hub. Across all of Devon, including Torbay, the ICB are working with Public Health to develop a networked hub model with menopause and long-acting reversible contraception (LARC) as the two main priorities. This ambition is aligned with the NHS Devon Joint Forward Plan.

Work is taking place to deliver a pilot menopause service across Devon which provides Torbay GPs (General Practice) with advice and guidance from British Menopause Society (BMS) specialist trained clinicians. This means that women in Torbay will have better access to specialist menopause knowledge in the management of complex cases. Partners are also delivering a programme of education events throughout the year, to support GPs in gaining a better knowledge of the management of menopause.

The development of a digital gateway for Women's Health on the MyHealth Devon website²⁹ will provide women in Torbay access to digital resources on a range of women's health conditions, allowing them to better self-help, seek local support and to inform better conversations with their GPs.

Recommendation:

To develop integrated service delivery pathways for women's health care, reducing the need to attend multiple appointments for routine health care.

6. Barriers to being physically active

Addressing the barriers that contribute to lower rates of physical activity among women and girls is crucial for improving public health and well-being.

²⁹ My Health Devon - Managing Your Health & Wellbeing (myhealth-devon.nhs.uk)

Ramble Club: Public Health Annual Report 23/24 (youtube.com)



According to Sport England in 2024, more men (at 65.9%) are more likely to be active than women (at 61.2%), although activity levels have increased in both groups over the last seven years³⁰. Data from the Adult Active Lives Survey and Children & Young People's survey shows that 1 in 4 Adults in Torbay ³¹ and 1 in 4 Children and Young People ³² are physically inactive. The differences in physical activity levels across those from lower income backgrounds exacerbates these inequalities further.

The reasons behind women achieving less time for sport and physical activity are complex and multi-faceted. In a recent systematic review and thematic analysis ³³ findings highlighted barriers such as a lack of time, body image and societal beauty standards, family duty and social support, religious and cultural norms, organisation and community facilities and environment, safety issues and physical environment. These factors are intertwined and affect women's participation in physical activity at various levels, suggesting the need for a holistic and multi-level approach to address these challenges.

³⁰ Long-term increase in activity levels positive but further action needed to tackle inequalities | Sport England

³¹ https://fingertips.phe.org.uk/

³² Active Lives | Children And Young People Activity Data (sportengland.org)

³³ Barriers and facilitators to physical activity for young adult women: a systematic review and thematic synthesis of qualitative literature - PMC (nih.gov)

In Torbay there are some excellent green and blue spaces, which creates opportunities to be in nature and improve physical and mental health. Local sports and health initiatives³⁴ are available to support local women to engage with more local physical activity.

Addressing the barriers that contribute to lower rates of physical activity among women and girls is crucial for improving public health and well-being. Efforts to promote inclusivity in sports can lead to more active communities and help mitigate the long-term effects of inactivity and obesity. Torbay on the Move is a multi-agency initiative which aims to have 'more people, more active, more often.' The strategy takes a place-based approach to population health improvement by focussing on eight themes.



Recommendation:

Developing inclusive approaches that facilitate and support girls and women to become more physically active

A note on language within this report:

Within this report, we use the terms 'women' and 'women's health.' However, it is important to acknowledge that it is not only people who identify as women or girls who access women's health and reproductive services to maintain their health and wellbeing. The terms 'woman' and 'women's health' are used for brevity, on the understanding that trans and non-binary individuals assigned female at birth also require access to these services. Delivery of care must therefore be

³⁴ Sports and health initiatives - Torbay Council

appropriate, inclusive, and sensitive to the needs of those individuals whose gender identity does not align with thew sex they were assigned at birth.

Conclusion and next steps

Thank you for reading my 2024 Director of Public Health report on women's health. This report is intended to support conversations about the health and wellbeing challenges facing women in society today. It highlights the sex and gender-specific challenges for all women and girls, emphasising the unique opportunities to address inequalities and their impacts on health.

Our challenge now across Torbay is to take decisive action and make the right decisions in all areas to achieve equality and improve outcomes for women.

The broad recommendations in this report are:

- 1. To develop flexible and inclusive employment practices to reflect and encourage women into education and employment.
- 2. To commit to actions which raise awareness of Domestic and Sexual Violence and directly address of the impact of domestic abuse on women who experience it.
- 3. To improve access, experience, and outcomes for women's healthcare through Torbay's women's health hub.
- 4. To recognise and supporting grass roots women's groups and activities as integral components of mental health and wellbeing provision.
- 5. To develop integrated service delivery pathways for women's health care, reducing the need to attend multiple appointments for routine health care.
- 6. To develop inclusive approaches that facilitate and support girls and women to become more physically active.

The next steps are to co-produce an action plan with leaders, decision-makers, and communities across Torbay to progress these recommendations. This will be initiated at the launch in October 2024 and will be a key focus over the next 12 months as we strive for system-wide improvements together.

I will keep our partners and stakeholders updated to keep momentum and share progress and learning. To ensure accountability to our communities, we must maintain a focus on measures and evidence which demonstrate the changes made. Therefore, I invite everyone to use the information and evidence base presented in this report to guide actions over the coming year to show our collective capacity to enact meaningful progress.

Individuals and organisations play a crucial role, and I am inviting you to be active in improving the health of women through:

 Advocacy for Equality: Using your voice, power and influence to support policies and initiatives that promote gender equality and address health disparities.

- Creating Supportive Environment: Creating a workplace culture that supports the health and wellbeing of all employees, with a focus on gender-specific needs.
- **Policy Development:** Implementing policies that promote gender equality and address health disparities within your organisation and the community.
- Data Collection and Analysis: Collecting and analysing data on health outcomes to identify areas of need and measure the impact of your initiatives.
- Leading by Example: Demonstrating inclusive and supportive behaviour in your daily life.
 Small and large actions can inspire others to follow suit.

By taking these steps, we can collectively help create a more equitable and healthier community for everyone in Torbay.

Dr Lincoln Sargeant

Director of Public Health for Torbay,

October 2024

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